

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. <i>09 264 160</i>	FILING DATE <i>1-19-01</i>
							CLAIMS	
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	
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TOTAL IND.	3							
TOTAL DEP.	7	↓	↓	↓	↓	↓	↓	
TOTAL CLAIMS	10	SEARCHED	INDEXED	FILED	MAILED	STAMPED	RECORDED	
TOTAL		SEARCHED	INDEXED	FILED	MAILED	STAMPED	RECORDED	